

FIG. 1 (Prior Art)

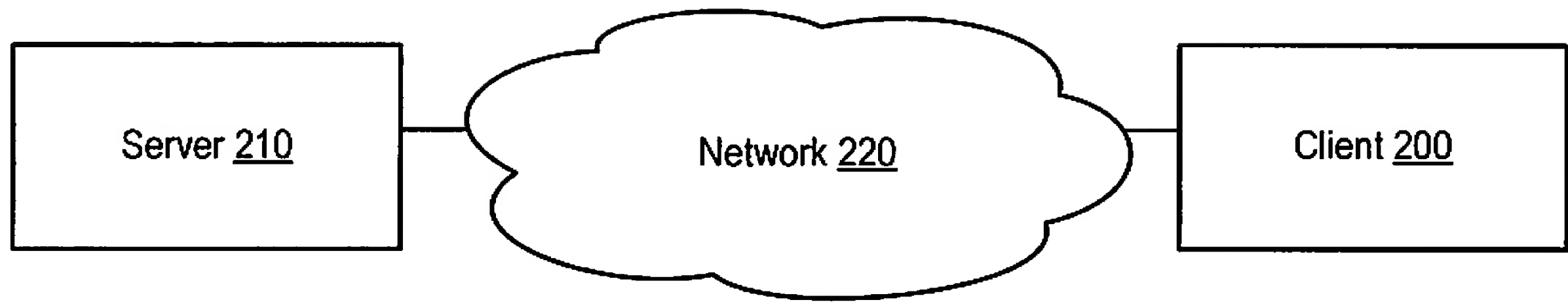


FIG. 2A

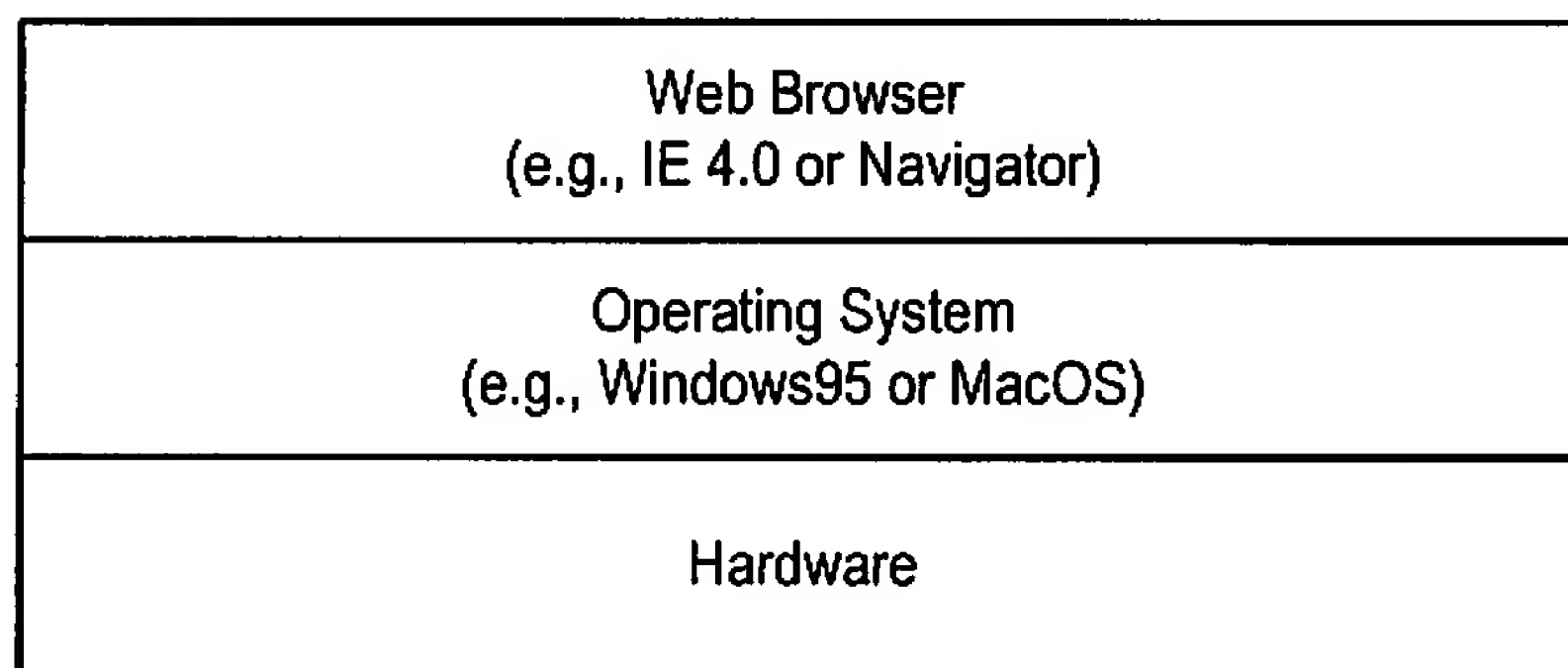


FIG. 2B

Process Starts

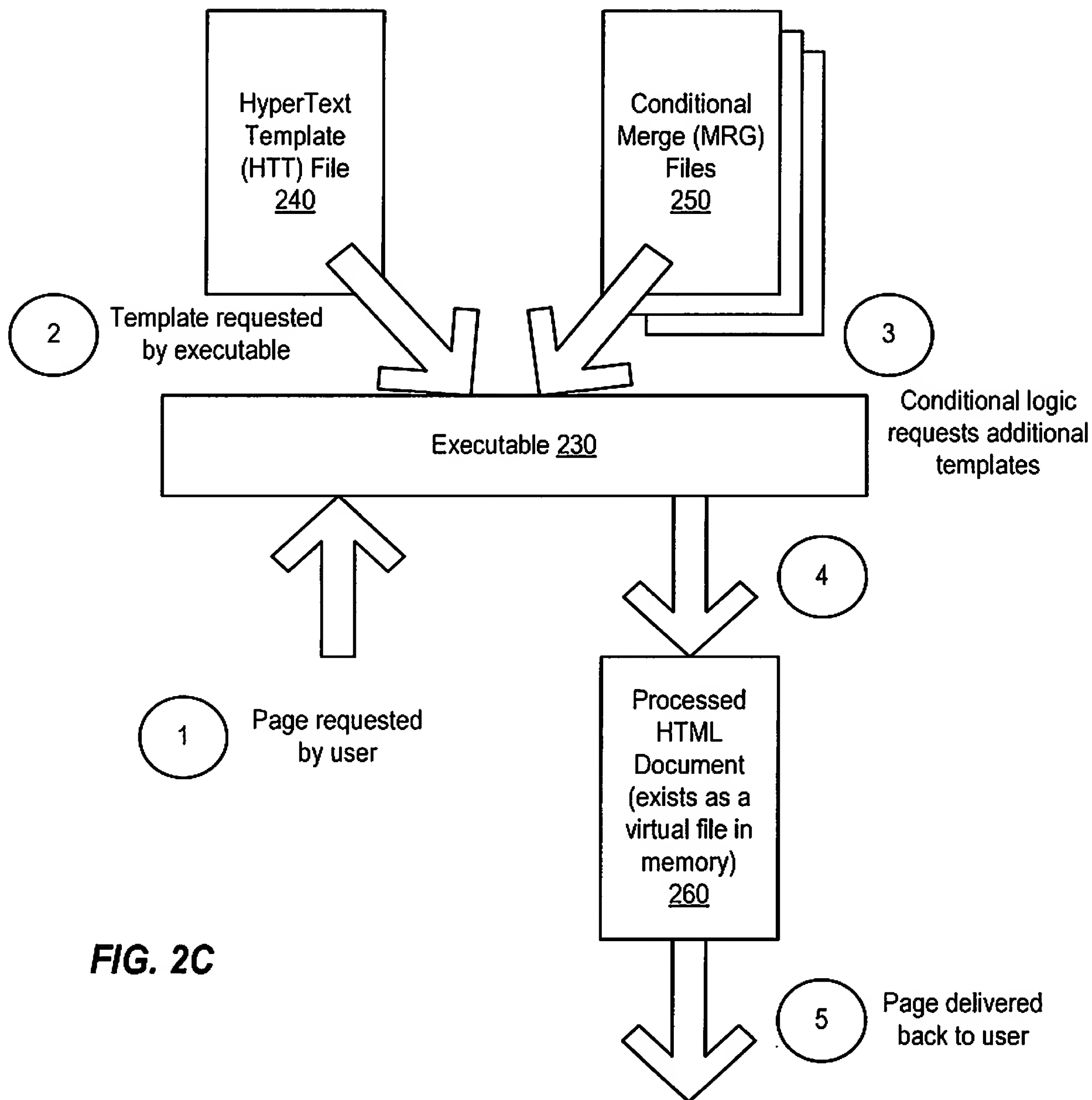


FIG. 2C

Process Repeats

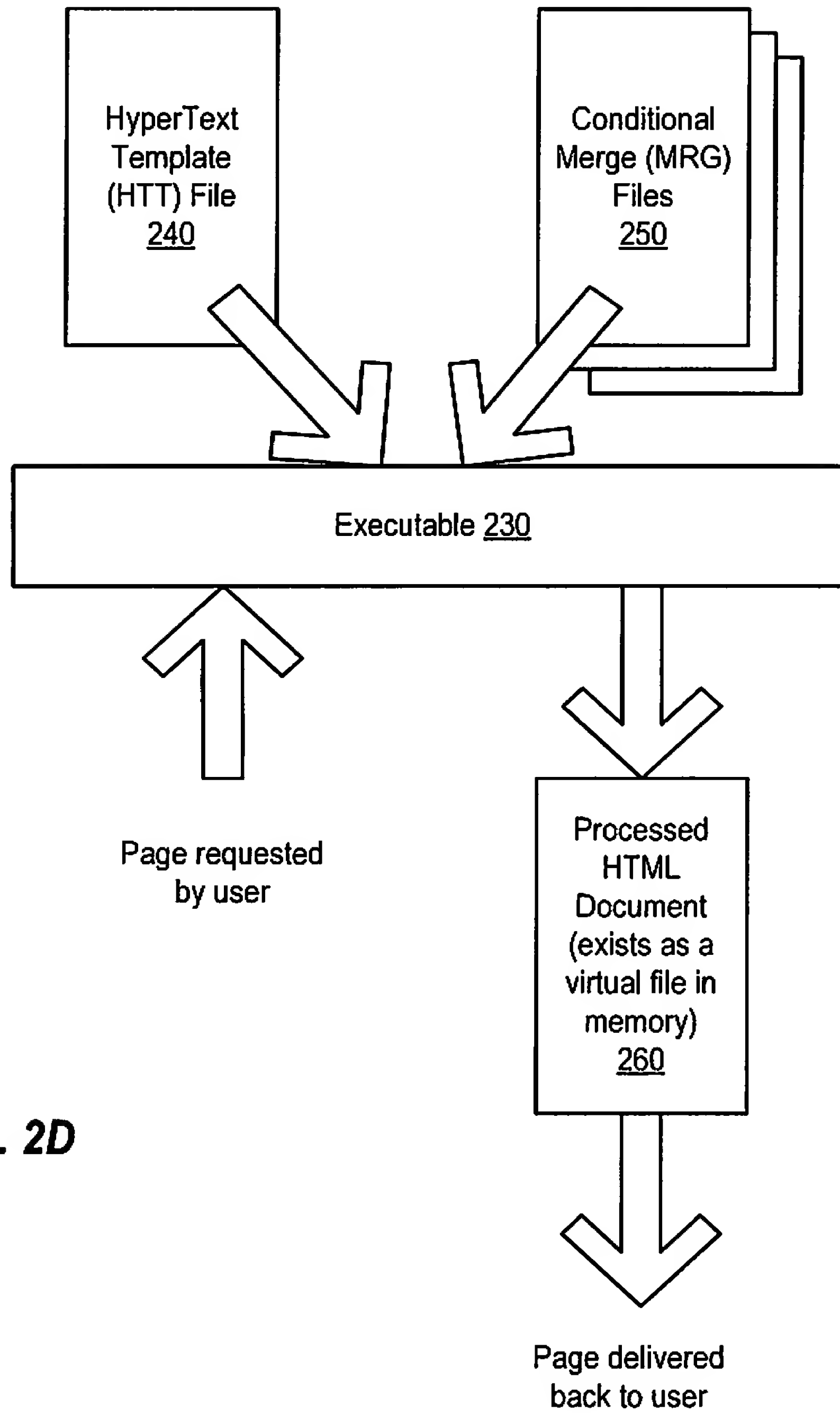


FIG. 2D

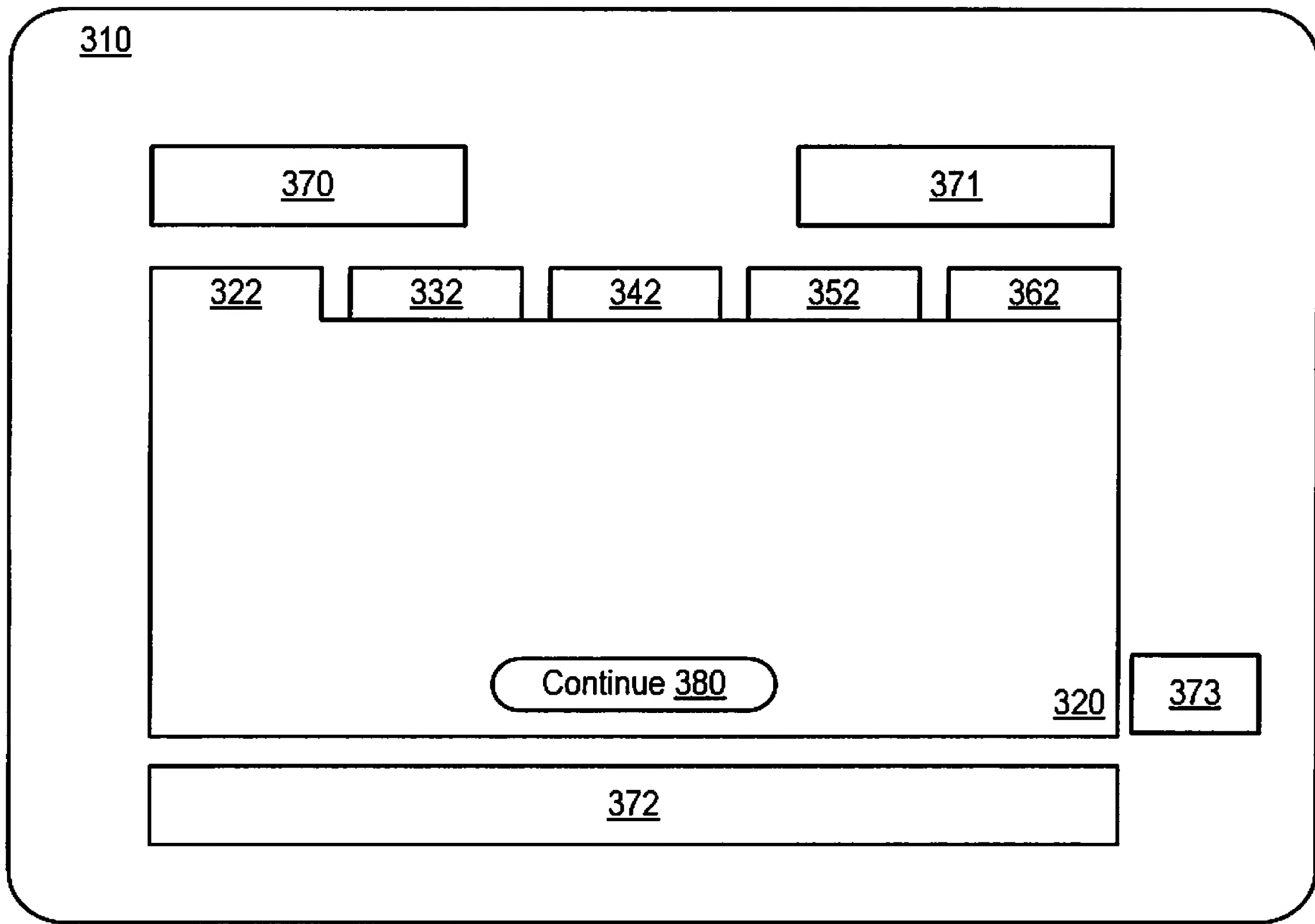


FIG. 3

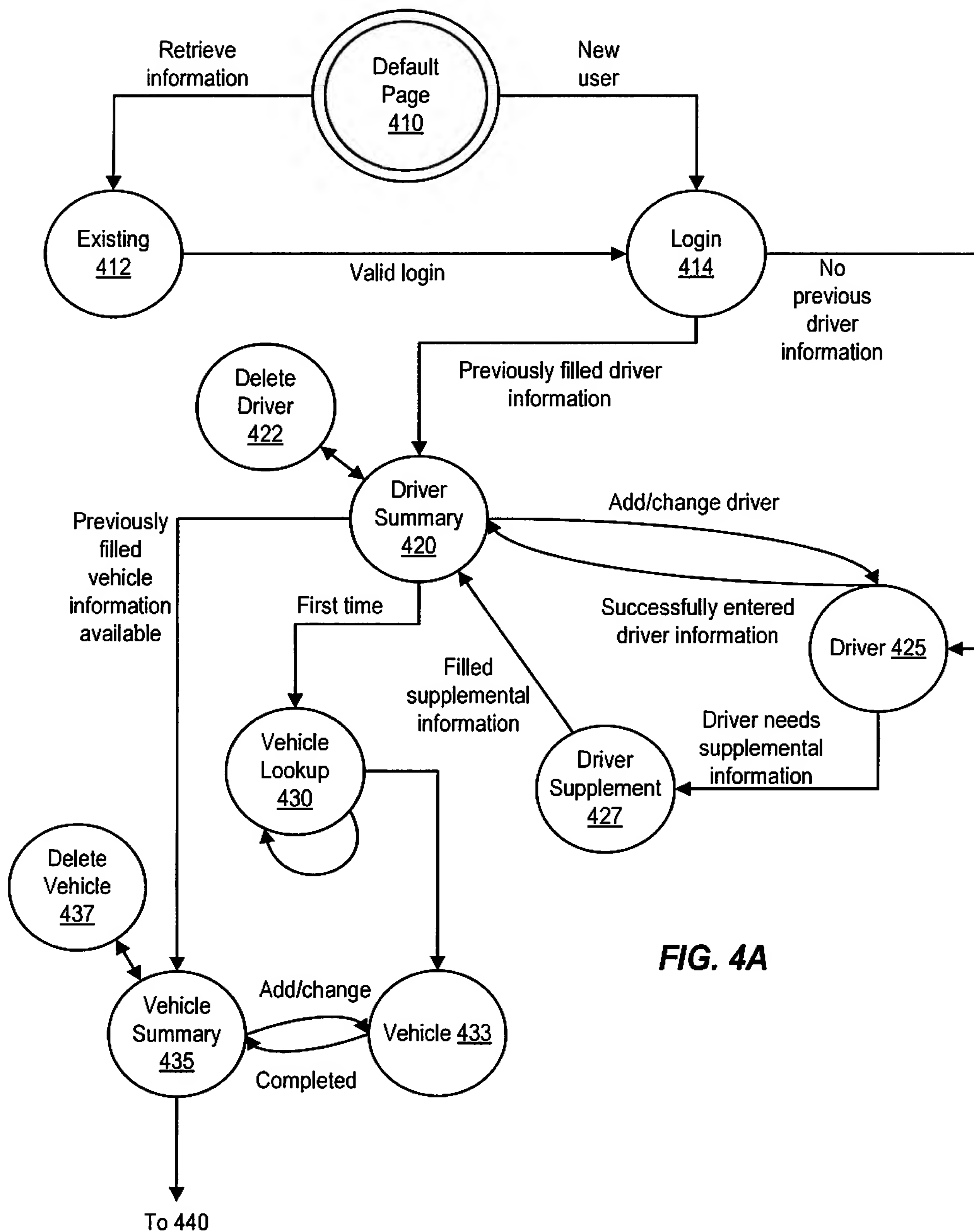
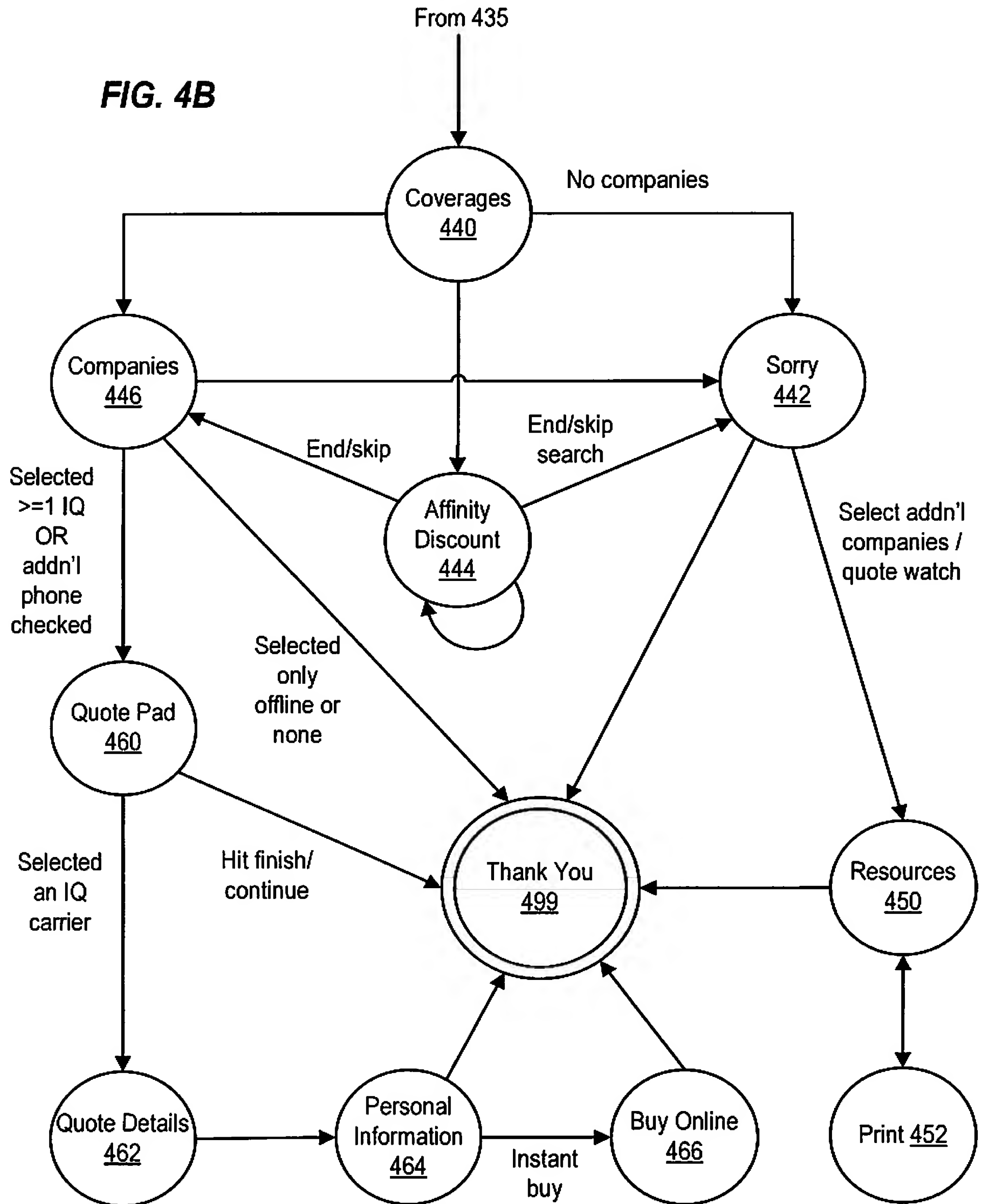



FIG. 4A

FIG. 4B



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552 562 572 582 592

Start State Drivers Vehicles Usage Discounts Coverage Quotes

522 532 542

Returning to InsWeb

I have already saved
information to
my InsWeb Account

New to InsWeb

I am new to InsWeb
and I want to get quotes

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Win a Mercedes ML320 SUV!

Complete our no-cost, no-obligation Quote Form for a chance to win.*
To begin, click on a button to the left.

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Faster, Smarter, Easier

InsWeb is a free online service that makes it easy
for you to shop for and compare quotes from many
of the nation's leading insurance companies.

- **Simplify your Insurance Shopping**
Fill out one form, one time.
- **Compare Free Insurance Quotes**
Discover how much you could save!
- **Connect with Leading Companies**
*Choose the quote that is right
for you.*


Note:

- We currently offer quotes for private passenger autos
and trucks only (no motorhomes or commercial
autos).
- We also offer motorcycle insurance.
- Canadian user? Click here

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reviewed by

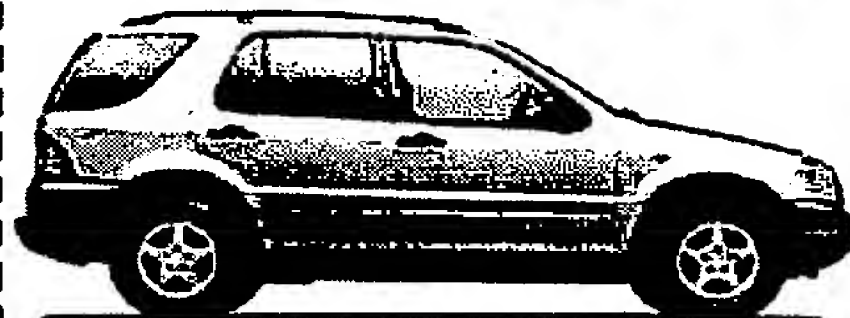



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Insurance Marketplace
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FIG. 5




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[Start](#) [State](#) [Policies](#) [Coverage](#) [Usage](#) [Discounts](#) [Coverage](#) [Quotes](#)


To shop for quotes, take 15-20 minutes to:




**Enter
Your
Information**



**Review
Your
Quotes***



**Compare
Features and
Benefits**



**Choose
Companies
and Send Your
Information**

Note:

- Your **current policy** and **vehicle registration** can help you complete the process more quickly.
- We will prefill some answers using our own data sources or with information you've previously entered. You can change this information at any time.

To begin, answer the question below:


In which state would you like to insure your vehicle?

Check here to save your information ☐

[Continue](#)

* Your personal information and the number of participating quoting companies in your state will determine how many quotes you receive.


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FIG. 6



Have Questions?
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StartStateDriversVehiclesUsageDiscountsCoverageQuote

► Driver #1 Info

Tip: Click on  for question-specific help.

Personal Information

First Name: Steve

Date of Birth:

Gender: ☒ M ☐ F

Marital Status:

If Married or Separated,
is your spouse a licensed driver? ☒ Yes ☐ No

Residence Information

Residence State:

Do You Currently Rent or own your residence?

Which residence type best describes your home?

How long have you lived at your current residence?
(if less than a month, enter one month)
 Yrs. Mos.

How long did you live at your previous residence?
 Yrs. Mos.

Occupation Information

What is your occupation?
(if retired, select previous occupation)

Are you retired?
☐ Yes ☒ No

How many years have you been in your present occupation or
been retired?

Have you ever been in the active military service?
☐ Yes ☒ No

Are you a graduate of an accredited 2 or 4 yr. college or
technical program?
☒ Yes ☐ No

Driving History

How old were you, in years and months, when you first
received your U.S. license?
 Yrs. Mos.


In which state are you licensed to drive?
(if you have an international license, select "International
License Only")

Have you completed a defensive driver course in the last 3
years?

In the last 5 years, has your license been
suspended/revoked?
☐ Yes ☒ No

Do you need to file a financial responsibility form (SR-22)?
☐ Yes ☒ No

Have you been cited for any violations or involved in any
accidents, regardless of fault, in the last 5 years, or
experienced any losses in the last 5 years?
☐ Yes ☒ No

Note: Driving records are verified with the state's Department of Motor Vehicles. 

Household Information

How many people living in your household will not be listed as drivers on your
policy?
(maximum of 9 household members)

Have you filed for bankruptcy, had any lawsuits or judgments against you, or
had adverse credit in the last 5 years?
☐ Yes ☒ No

Have you or any member of your household been convicted of a
misdemeanor in the last 5 years, or a felony in the last 10 years?
☐ Yes ☒ No


How many times has the primary wage earner of your household changed
careers in the last 5 years?

What best describes the annual income of the highest wage earner in your
household?


Check here to save your information ☐

Continue

FIG. 7




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Start State **Drivers** Vehicles Usage Discounts Coverage Quotes


► Driver #2 Info

Tip: Click on  for question-specific help.


Personal Information




First Name:



Date of Birth:




Gender: ☐ M ☒ F




Marital Status:

Residence Information



Residence State:

Occupation Information




What is Driver's occupation?
(if retired, select previous occupation)

☐ Yes ☒ No


☐ Yes ☒ No

☐ Yes ☒ No


☐ Yes ☒ No




Is Driver retired?



How many years has Driver been in their present occupation or been retired?




Has Driver ever been in the active military service?




Is Driver a graduate of an accredited 2 or 4 yr. college or technical program?


Driving History




How old was Driver, in years and months, when they first received their U.S. license?




In which state is Driver licensed to drive?
(if Driver has an international license, select "International License Only")




Has Driver completed a defensive driver course in the last 3 years?




In the last 5 years, has Driver's license been suspended/revoked?



Does Driver need to file a financial responsibility form (SR-22)?



Has Driver been cited for any violations or involved in any accidents, regardless of fault, in the last 5 years, or experienced any losses in the last 5 years?



Note: Driving records are verified with the state's Department of Motor Vehicles.


Household Information

What is Driver's relation to you?

Is Driver a resident of your household?

Check here to save your information ☐

FIG. 8



Where You And Your Insurance Really Click™

Start

State

Drivers

Vehicles

Usage

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Have Questions?

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Live Help

Driver Summary

No.	Name	Date of Birth	Relationship	Licensed State	Residence State	Change	Delete
1	Steve	11/16/1958	Self	CA	CA	Change	Delete
2	Jamie	01/10/1960	Spouse	CA	CA	Change	Delete

Add Another Driver


Add any additional licensed drivers living in household

[Add](#)


Check here to save your information

[Continue](#)

FIG. 9




Where You And Your Insurance Really Click™

Have Questions?
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StartStateDrivers**Vehicles**UsageDiscountsCoverageQuotes

► **Vehicle #1 Info**

Vehicle Information
1989 Toyota, Long Bed Deluxe 4WD 

Purchase and Finance Information
Date purchased/leased: MM / YY
03 / 1992
Cost new (approximate) : \$17800.00
Term length if financed or leased: N/A - wholly owned. ▼

Registration Information
Registered to: Self ▼
Registered state: California ▼
City where parked overnight (must be in CA): San Jose
Zip Code where parked overnight (must be valid for City) : 95131
Garage type: Full Garage ▼

Special Vehicle Considerations
Manufactured for use outside US; Considered a classic;
Custom equipment modifications; Extensive unrepaired damage; ☐ Yes ☒ No
Has vehicle ever been stolen:

Special Equipment
Canopy/Camper Tops; Custom Painting; Special Wheels/Rims;
Stereo equipment over \$350; Custom Body Work; ☐ Yes ☒ No
Van Modifications; Winch

Additional Equipment
Security System: Alarm Only ▼
4 wheel drive: ☒ Yes ☐ No
Anti-lock brakes: All-wheel Anti-Lock ▼
Automatic seat belts: ☒ Yes ☐ No
Airbags: Driver's and Passenger's Side Only ▼



Check here to save your information ☐


FIG. 10



Where You And Your Insurance Really Click™

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[Live Help](#)

Start

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Vehicles

Usage

Coverage

Discounts

Quotes

Vehicle Summary

No.	Year	Make	Model	Change	Delete
1	1999	ACURA	INTEGRA GS	<div>Change</div>	<div>Delete</div>


Add Another Vehicle

Add

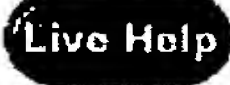
Check here to save your information ☐

Continue

FIG. 11




Where You And Your Insurance Really Click™



Have Questions?
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StartStateDrivers**Vehicles**UsageDiscountsCoverageQuotes



Vehicle Usage


Driver/Vehicle Usage Table
Please select the percentage of time each vehicle is driven by each listed driver.



		Vehicle #1 1989 Toyota	Vehicle #2 1992 Toyota
 No.	Driver		
1	Steve	<input type="text" value="0"/> %	<input type="text" value="0"/> %
2	Jamie	<input type="text" value="0"/> %	<input type="text" value="0"/> %
Total:		100%	100%

Vehicle #1: 1989 Toyota, Long Bed Deluxe 4WD
 How many miles is the vehicle driven annually?
 miles
 What is the vehicle *primarily* used for?

If **Commute** is selected above, please answer the following two questions.
 How many miles is the vehicle driven during one-way commute?
 miles (one way)
 How many days per week is the vehicle used for commuting?
 days/week
 Is the **1989 Toyota** used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?
☐ Yes ☒ No


Vehicle #2: 1992 Toyota, Corolla Deluxe 4WD
 How many miles is the vehicle driven annually?
 miles
 What is the vehicle *primarily* used for?

If **Commute** is selected above, please answer the following two questions.
 How many miles is the vehicle driven during one-way commute?

 How many days per week is the vehicle used for commuting?
 days/week
 Is the **1992 Toyota** used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?
☐ Yes ☒ No

Check here to save your information ☐

FIG. 12



Where You And Your Insurance Really Click™

Start

State

Drivers

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Usage

Discounts

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Quotes

Have Questions?

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Live Help

▶ Vehicle Usage Continued

HELP

Is the 1989 Toyota Used For:

Delivery:

☐ Yes

☐ No

Hire:

☐ Yes

☐ No

Public Livery:

☐ Yes

☐ No

Commercial Registration:

☐ Yes

☐ No

Emergency Vehicle:


☐ Yes

☐ No


Check here to save your information

Continue

FIG. 13



Where You And Your Insurance Really Click™

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Start

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▶ Additional Discount Info

 **Membership Groups**

Your membership in various groups may qualify you for a discount. The amount and number of discounts that will be applied varies by company. Based on your state, the following groups may offer discounts. Please check all you are currently a member of.

Banks, Credit Unions, Credit Cards (check all that apply)

☐ Credit Union for Public Employee Group

☐ POL/TEL Federal Credit Union

☐ Federal Express Credit Association

☐ Retirees Payroll Deduction

☐ GENTELCO Federal Credit Union

☐ Tri-Gentel Federal Credit Union

City, County, State (check all that apply)

☐ AAA

☐ Ruralite Affiliate

☐ Harvest States Cooperative

☐ Tri-Gentel Federal Credit Union

☐ Inter-mountain Farmers Association (IFA)

Educational Institutions (check all that apply)

☐ AAA

☐ Ruralite Affiliate

☐ Harvest States Cooperative

☐ Tri-Gentel Federal Credit Union

☐ Inter-mountain Farmers Association (IFA)

Employer Groups (check all that apply)

☐ California Federation of Teachers

☐ Pacific Telecom

☐ Farmland Affiliates Employee

☐ Public Utilities Employee

☐ Farmland Industries Employee

☐ Retirees Payroll Deduction

☐ Federal Government Employee

☐ Widow/Retired Public Employee

☐ Nationwide Enterprise Employee

Professional Associations (check all that apply)

☐ AAA

☐ Ruralite Affiliate

☐ Harvest States Cooperative

☐ Tri-Gentel Federal Credit Union

☐ Inter-mountain Farmers Association (IFA)

Other (check all that apply)

☐ AAA

☐ Ruralite Affiliate

☐ Harvest States Cooperative

☐ Tri-Gentel Federal Credit Union

☐ Inter-mountain Farmers Association (IFA)

Continue

FIG. 14



Have Questions?
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Start | **State** | **Drivers** | **Vehicles** | **Usage** | **Coverage** | **Discounts** | **Quotes**

Desired Coverage

To make your coverage selection easier,
use CoverageAssistSM below. It will
automatically fill in coverage amounts, based
on the level that you select and the state you
live in.



Hang in there. You're close
to completing the quote
form. Keep this Mercedes
SUV in mind. It could be
yours!

CoverageAssist

Desired Coverage Level: **SELECT** **7**

Calculate

Note: If you desire a different amount than what is
prefilled in any coverage, you can change the amount below.

Coverage	
Bodily Injury Liability:	Select... ▼
Property Damage Liability:	Select... ▼
Medical Payments:	Select... ▼
Uninsured and Underinsured Motorist Bodily Injury: (cannot be higher than Bodily Injury Liability requested above)	Select... ▼
Uninsured Motorist Property Damage Liability: (available only if Uninsured and Underinsured Motorist Bodily Injury is also selected)	Select... ▼
Vehicle #1: 1999 AGURA	
Comprehensive Deductible:	Select... ▼
Collision Deductible: (Comprehensive Coverage is required for Collision Coverage)	Select... ▼
Rental Reimbursement:	Select... ▼
Waiver of Collision Deductible: (applies if you have an insured vehicle with Collision coverage)	Select... ▼
Towing & Labor:	Select... ▼
CB Radio:	Select... ▼
Coverage Start Date:	
Choose a desired effective date for this policy: (must be today's date or later)	MM DD YYYY 03 / 21 / 2000
Note: Coverage is not effective until you receive confirmation from the insurance carrier selected on the Quote Pad.	
Continue	

FIG. 15



Have Questions? [See our Live Help Options](#) [Live Help](#)

Start | **State** | **Drivers** | **Vehicles** | **Usage** | **Coverage** | **Discounts** | **Quote**

Quoting Companies - These companies are prepared to offer you quotes.

- Uncheck the box in the "Quote Me" column if you do not want a quote from a particular company.
- Select an agent from the drop-down box that may appear underneath a company to receive a quote.


Click on logo for company details		Rating	Quote Me	HELP
	Auto Insurance Program from The Hartford	AA/A+	<input checked="" type="checkbox"/>	
	Member of group	NR/A+	<input checked="" type="checkbox"/>	
	CSE Insurance Group	N/A/A-	<input checked="" type="checkbox"/>	
	Nationwide Insurance	AA/A+	<input checked="" type="checkbox"/>	
	State Farm Insurance Companies Like a good neighbor, State Farm is there.	AAA/A++	<input checked="" type="checkbox"/>	

Select an agent from the list below to receive a quote from State Farm:


Select... ▼

	INSURANCE COMPANIES	A/A+	<input checked="" type="checkbox"/>
	GE Financial Network	AA/A-	<input checked="" type="checkbox"/>
	Orion Auto	A/A	<input checked="" type="checkbox"/>
	FINANCIAL INDEMNITY COMPANY	N/A/A++	<input checked="" type="checkbox"/>
	21st Century Insurance Company	A+/A	<input checked="" type="checkbox"/>
	GMAC Insurance	Apl/A+	<input checked="" type="checkbox"/>
	RELIANCE NATIONAL EXPLORER Insurance Company	A/A-	<input checked="" type="checkbox"/>
	CNA For All the Commitments You Make	A/A+	<input checked="" type="checkbox"/>
	RelianceDirect	A/A-	<input checked="" type="checkbox"/>



FIG. 16




Where You And Your Insurance Really Click™

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[Start](#) [State](#) [Drivers](#) [Vehicles](#) [Usage](#) [Discounts](#) [Coverage](#) [Quotes](#)

▶ Driver Summary 1710
Attention!  indicates that data on this page is either missing, incorrect or requires update.
Click on:  next to the entries below for detailed instructions.

No.	Name	Date of Birth	Relationship	Licensed State	Residence State	Change	Delete
 1	Steve	11/16/1958	Self	CA	CA	Change	(required)
2	Jamie	01/10/1960	Spouse	CA	CA	Change	Delete


Add Another Driver [Add](#)


▶ Add any additional licensed drivers living in household

Check here to save your information ☐

[Continue](#)

FIG. 17





Have Questions?
See our [Live Help Options](#) 


StartStateDrivers**Vehicles**UsageDiscountsCoverageQuotes

Vehicle Usage


Driver/Vehicle Usage Table
Please select the percentage of time each vehicle is driven by each listed driver.

		No.	Driver	Vehicle #1 1989 Toyota	Vehicle #2 1992 Toyota
1810		1	Steve	70 %	0 %
1810		2	Jamie	30 %	0 %
			Total:	100%	100%

Vehicle #1: 1989 Toyota, Long Bed Deluxe 4WD


 How many miles is the vehicle driven annually?

9320 miles


 What is the vehicle *primarily* used for?

Commute


If **Commute** is selected above, please answer the following two questions.

 How many miles is the vehicle driven during one-way commute?

13 miles (one way)


 How many days per week is the vehicle used for commuting?

5 days/week


 Is the **1989 Toyota** used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?

☒ Yes ☐ No

Vehicle #2: 1992 Toyota, Corolla Deluxe 4WD


 How many miles is the vehicle driven annually?

9530 miles


 What is the vehicle *primarily* used for?

Commute


If **Commute** is selected above, please answer the following two questions.

 How many miles is the vehicle driven during one-way commute?

15

 How many days per week is the vehicle used for commuting?

5 days/week

 Is the **1992 Toyota** used for delivery, hire, public livery, commercial registration, or as an emergency vehicle?

☒ Yes ☐ No

Check here to save your information ☐

Continue

FIG. 18

REPLACEMENT SHEET

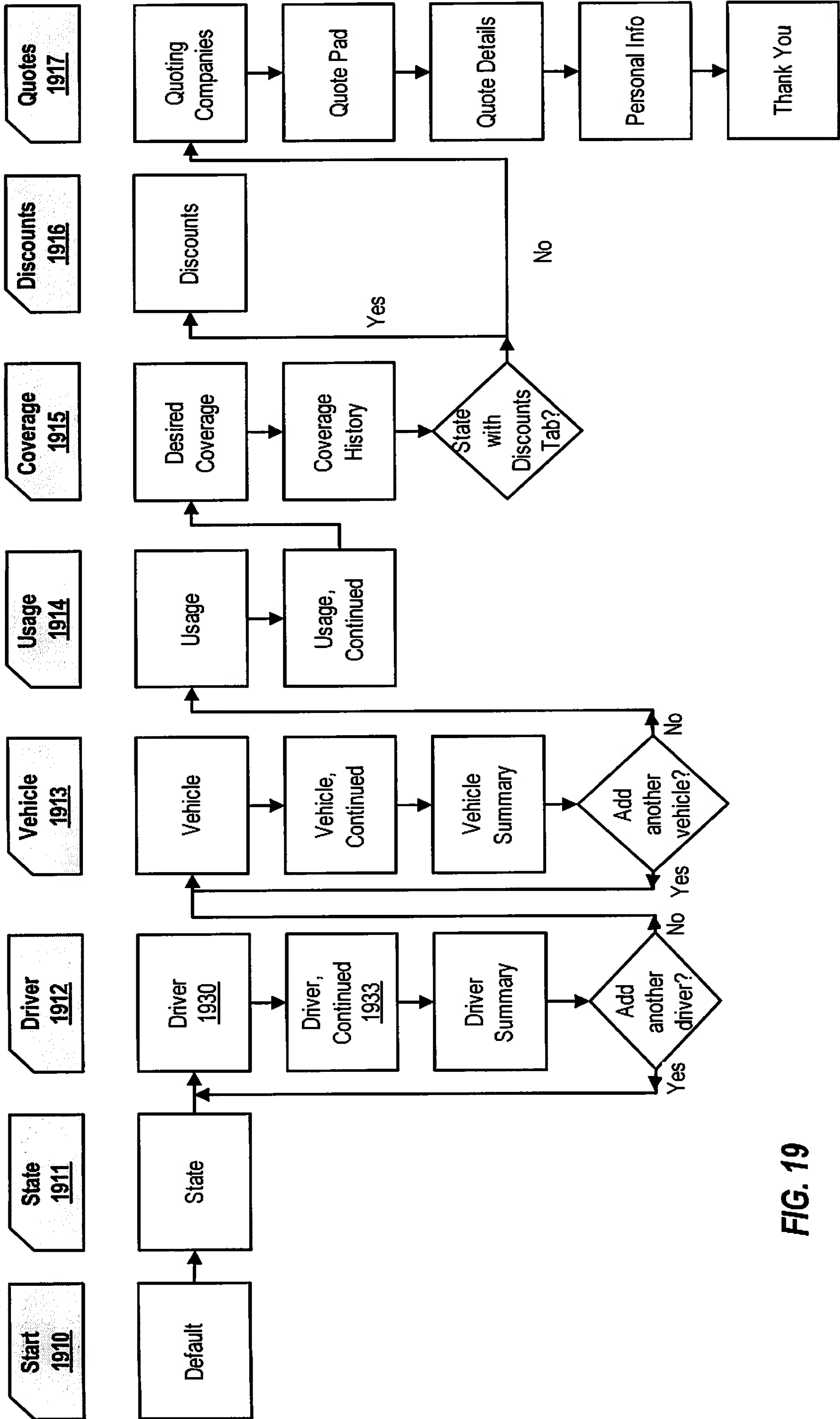


FIG. 19